

## ʔakisq̄nuk First Nation

### Application for Post Secondary Education Sponsorship

Please complete this application in full. If you have any questions, please contact the Education Manager @ 250-342-6301 or by email: [ssam@akisq̄nuk.org](mailto:ssam@akisq̄nuk.org)

Date of Application: \_\_\_/\_\_\_/\_\_\_

Surname: \_\_\_\_\_ Given Name: \_\_\_\_\_ Initial: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City/ Town: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Email Address: \_\_\_\_\_

Telephone Number: ( ) \_\_\_\_\_ - \_\_\_\_\_ Fax: ( ) \_\_\_\_\_ - \_\_\_\_\_

Band: \_\_\_ ʔakisq̄nuk \_\_\_ Other

Band Number: \_\_\_\_\_ Date of Birth: \_\_\_/\_\_\_/\_\_\_

#### **Marital Status:**

\_\_\_ Single \_\_\_ Married \_\_\_ Common-Law \_\_\_ Single Parent

\*to claim Common-Law, you must have resided in the same dwelling with your partner for a minimum of one year.

#### **Employment status of spouse:**

\_\_\_ Employed \_\_\_ Unemployed \_\_\_ Student

Annual earnings of spouse: \$ \_\_\_\_\_

#### **Dependents (living with you)**

Surname	Given Name	Relationship	Age


Emergency Contact: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_ - \_\_\_\_\_

Have you received Education Sponsorship from ?akisq̄nuk First Nation in the past?

Yes / No

If yes, did you complete your program of study?

Yes / No

If no, why not? \_\_\_\_\_

**Last Post-Secondary Institute attended:**

Name: \_\_\_\_\_

Location: \_\_\_\_\_

Course / Program: \_\_\_\_\_

Please check one: Certificate: \_\_\_ Diploma: \_\_\_ B.A.: \_\_\_ Masters: \_\_\_ PhD: \_\_\_

Year of completion: \_\_\_\_\_

**Name of Institute Attending:** \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City / Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone #: ( ) \_\_\_\_\_ - \_\_\_\_\_ Program of Study: \_\_\_\_\_

Length of Program: \_\_\_ Years / \_\_\_ Months

Current year of study: (1<sup>st</sup>, 2<sup>nd</sup>, etc...) \_\_\_\_\_

Start Date: \_\_\_\_\_ Anticipated date of Graduation: \_\_\_\_\_

What will you receive upon completion?

Certificate: \_\_\_ Diploma: \_\_\_ B.A.: \_\_\_ Masters: \_\_\_ PhD: \_\_\_

Studies are: \_\_\_ Full time \_\_\_ Part time

### Secondary Education

Last Grade Completed: \_\_\_\_\_

Last Secondary School Attended: \_\_\_\_\_

Address: \_\_\_\_\_

City / Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

### Career Goals

Please describe your career goals:

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**Type of Assistance being requested:** (check all that apply, and provide amount)

Tuition & Fees: \_\_\_\_\_ Amount: \$ \_\_\_\_\_

Books & Supplies: \_\_\_\_\_ Amount: \$ \_\_\_\_\_

Living Allowance: \_\_\_\_\_ # of Months \_\_\_\_\_ Amount: \$ \_\_\_\_\_

Travel: \_\_\_\_\_ Amount: \$ \_\_\_\_\_

Other: (provide explanation)

\_\_\_\_\_ Amount: \$ \_\_\_\_\_

\_\_\_\_\_ Amount: \$ \_\_\_\_\_

**Total Requested Funding: \$ \_\_\_\_\_**

ʔakisq̓nuk First Nation  
Post Secondary Student Declaration

I, \_\_\_\_\_, hereby declare that I have completed all required sections of this application to the best of my ability.

I further declare that I have read, I understand and I agree to abide by all clauses contained in the ʔakisq̓nuk First Nation Education Policies and Procedures.

I hereby Authorize the Education Manager of ʔakisq̓nuk First Nation access to information concerning my attendance, grades, and all other information from

\_\_\_\_\_ (Name of Institute).

I am also confirming that I have been resident in Canada for 12 Consecutive months prior to my application for Education Sponsorship.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Witness Signature

\_\_\_\_\_  
Date

Please submit completed application along with your Letter of Acceptance and copy of current Status Card to:

Education Manager  
ʔakisq̓nuk First Nation  
3050 Hwy 93/95  
Windermere, BC  
V0B 2L2  
Fax: (250) 342-9693